

PERFORMANCE AUDIT  
OF THE

IONIA CORRECTIONAL FACILITIES:  
RICHARD A. HANDLON MICHIGAN TRAINING UNIT  
AND IONIA MAXIMUM CORRECTIONAL FACILITY

DEPARTMENT OF CORRECTIONS

September 1999

## EXECUTIVE DIGEST

# IONIA CORRECTIONAL FACILITIES

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### INTRODUCTION

This report, issued in September 1999, contains the results of our performance audit\* of the Ionia Correctional Facilities, Department of Corrections (DOC).

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### AUDIT PURPOSE

This performance audit was conducted as part of the constitutional responsibility of the Office of the Auditor General. Performance audits are conducted on a priority basis related to the potential for improving effectiveness\* and efficiency\*.

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### BACKGROUND

The Ionia Correctional Facilities include the Richard A. Handlon Michigan Training Unit (HMTU) and Ionia Maximum Correctional Facility (I-Max). These facilities are under the jurisdiction of DOC and are physically separate, with a warden as the chief administrative officer for each facility. The DOC director appoints the wardens, who are classified under the State civil service system.

The two facilities share services in the areas of personnel and the business office.

The mission\* of the two facilities is to confine prisoners securely and to provide a safe living and working environment with opportunities for personal growth and

\* See glossary at end of report for definition.

development. HMTU, opened in 1958, is a level II medium security\* facility for younger males and has a capacity of 1,327 prisoners. I-Max, opened in 1987, has a capacity of 240 level II medium security and 322 level VI maximum security\* male prisoners.

HMTU had appropriations of \$20.3 million for fiscal year 1997-98 and, as of December 31, 1998, had 324 employees. I-Max had appropriations of \$22.8 million for fiscal year 1997-98 and, as of December 31, 1998, had 362 employees.

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AUDIT OBJECTIVES,  
CONCLUSIONS, AND  
NOTEWORTHY  
ACCOMPLISHMENTS

**Audit Objective:** To assess the effectiveness of the Ionia Correctional Facilities' safety and security operations.

**Conclusion:** We concluded that the Ionia Correctional Facilities' safety and security operations were generally effective. However, we noted reportable conditions\* related to prisoner shakedowns\* and cell searches\*, tool controls, key security, gate manifests\*, and accounting for visitors (Findings 1 through 5).

**Audit Objective:** To assess the effectiveness and efficiency of the Ionia Correctional Facilities' prisoner care and maintenance operations.

**Conclusion:** We concluded that the Ionia Correctional Facilities' prisoner care and maintenance operations were generally effective and efficient. However, we noted reportable conditions related to preventive maintenance and employee meals (Findings 6 through 8).

\* See glossary at end of report for definition.

**Noteworthy Accomplishments:** HMTU has been accredited by the Commission on Accreditation for Corrections of the American Correctional Association.

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AUDIT SCOPE AND  
METHODOLOGY

Our audit scope was to examine the program and other records of the Ionia Correctional Facilities. Our audit was conducted in accordance with *Government Auditing Standards* issued by the Comptroller General of the United States and, accordingly, included such tests of the records and such other auditing procedures as we considered necessary in the circumstances.

Our methodology included testing of records and activities for the period January 1, 1997 through December 31, 1998. Our methodology also included a preliminary review of the facilities' operations. This included discussions with the facilities' staff regarding their functions and responsibilities; tests of program records; and review of directives, policies and procedures, reports, and other reference materials to gain an understanding of the facilities' activities. We conducted tests of records related to safety and security, prisoner care, and preventive maintenance activities for compliance with applicable policies and procedures and overall program effectiveness and efficiency.

In addition, we developed a survey (see supplemental information) requesting input from certain individuals and businesses regarding their association with the facilities.

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AGENCY RESPONSES

Our audit report contains 8 findings and 8 recommendations. HMTU and I-Max indicated that they either have complied with or have taken steps to comply with all of the recommendations.

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Mr. Bill Martin, Director  
Department of Corrections  
Grandview Plaza  
Lansing, Michigan

Dear Mr. Martin:

This is our report on the performance audit of the Ionia Correctional Facilities, Department of Corrections.

This report contains our executive digest; description of agency; audit objectives, scope, and methodology and agency responses; comments, findings, recommendations, and agency preliminary responses; description of survey and summary of survey responses, presented as supplemental information; and a glossary of acronyms and terms.

Our comments, findings, and recommendations are organized by audit objective. The agency preliminary responses were taken from the agency's responses subsequent to our audit fieldwork. The *Michigan Compiled Laws* and administrative procedures require that the audited agency develop a formal response within 60 days after release of the audit report.

We appreciate the courtesy and cooperation extended to us during this audit.

Sincerely,

Thomas H. McTavish, C.P.A.  
Auditor General

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## Description of Agency

The Ionia Correctional Facilities include the Richard A. Handlon Michigan Training Unit (HMTU) and Ionia Maximum Correctional Facility (I-Max). These facilities are under the jurisdiction of the Department of Corrections (DOC) and are physically separate, with a warden as the chief administrative officer for each facility. The DOC director appoints the wardens, who are classified under the State civil service system.

The two facilities share services in the areas of personnel and the business office.

The mission of the two facilities is to confine prisoners securely and to provide a safe living and working environment with opportunities for personal growth and development. HMTU, opened in 1958, is a level II medium security facility for younger males and has a capacity of 1,327 prisoners. I-Max, opened in 1987, has a capacity of 240 level II medium security and 322 level VI maximum security male prisoners.

HMTU provides academic programs to prisoners, including special education, adult basic education, and general educational development (GED) completion. Vocational trade programs include building trades, machine shop, welding, horticulture, and automobile mechanics. Also, HMTU has a social skills development unit that serves men who are lacking in skills necessary to live normal productive lives. This program works to enable these prisoners to be released to the general population within DOC or to the community with improved basic living and work skills.

I-Max provides increased security for level VI prisoners who have proven to be assaultive to staff and other prisoners, who were unmanageable in lower custody levels, or who were high escape risks. I-Max is operated on a tightly regulated routine for its level VI population, including totally controlled movement, limited out-of-cell activity in small groups, limited employment programs, and significantly fewer out-of-cell program opportunities than in other facilities.

Other programs offered to prisoners at HMTU and I-Max are sports, recreation, religion, group counseling, and individual counseling. The level II prisoners are given the

opportunity to work at the prisons in areas such as food service and building maintenance.

HMTU had appropriations of \$20.3 million for fiscal year 1997-98 and, as of December 31, 1998, had 324 employees. I-Max had appropriations of \$22.8 million for fiscal year 1997-98 and, as of December 31, 1998, had 362 employees.

## Audit Objectives, Scope, and Methodology and Agency Responses

### Audit Objectives

Our performance audit of the Ionia Correctional Facilities, Department of Corrections (DOC), had the following objectives:

1. To assess the effectiveness of the Ionia Correctional Facilities' safety and security operations.
2. To assess the effectiveness and efficiency of the Ionia Correctional Facilities' prisoner care and maintenance operations.

### Audit Scope

Our audit scope was to examine the program and other records of the Ionia Correctional Facilities. Our audit was conducted in accordance with *Government Auditing Standards* issued by the Comptroller General of the United States and, accordingly, included such tests of the records and such other auditing procedures as we considered necessary in the circumstances.

### Audit Methodology

Our audit procedures were conducted during the period October 1998 through January 1999 and included examination of the Ionia Correctional Facilities' records and activities for the period January 1, 1997 through December 31, 1998.

To establish our objectives, we conducted a preliminary review of the facilities' operations. This included discussions with facilities' staff regarding their functions and responsibilities and a review of program records and DOC and the facilities' policy directives and procedures. Also, we reviewed the facilities' goals and objectives, various committee meeting minutes, and the Commission on Accreditation for Corrections' evaluation reports to gain an understanding of the facilities' activities and to form a basis for selecting certain operations for audit. In addition, we developed a survey (see supplemental information) requesting input from certain individuals and businesses regarding their association with the facilities.

To assess the effectiveness of the facilities' safety and security operations, we conducted tests of records related to firearm inventories, employee firearm qualifications, employee training, and searches of employees. Also, we examined records related to prisoner and cell searches. In addition, we accessed controls and tested inventories related to critical and dangerous tools and keys. We also tested the procedures to account for visitors by examining entries in the visitor sign-in books. Further, we examined documentation of items taken into and out of the facilities.

To assess the effectiveness and efficiency of the facilities' prisoner care and maintenance operations, we conducted tests of records related to preventive maintenance programs, fire safety activities, housekeeping and sanitation inspections, emergency electrical backup tests, and use of procurement cards. We tested records and procedures related to employee meals and medical clearance for prisoners. Also, we analyzed prisoner store financial information and reviewed controls for prisoner funds and prisoner store operations. In addition, we verified and tested the reconciliation of the resident accounting credit card system to the State's accounting system.

#### Agency Responses

Our audit report contains 8 findings and 8 recommendations. HMTU and I-Max indicated that they either have complied with or have taken steps to comply with all of the recommendations.

The agency preliminary response which follows each recommendation in our report was taken from the agency's written comments and oral discussion subsequent to our audit fieldwork. Section 18.1462 of the *Michigan Compiled Laws* and Department of Management and Budget Administrative Guide procedure 1280.02 require DOC to develop a formal response to our audit findings and recommendations within 60 days after release of the audit report.

# COMMENTS, FINDINGS, RECOMMENDATIONS, AND AGENCY PRELIMINARY RESPONSES

## SAFETY AND SECURITY OPERATIONS

### COMMENT

**Background:** The Ionia Correctional Facilities operate under the policy directives established by the Department of Corrections (DOC) as well as the Ionia Correctional Facilities' operating procedures, which are developed internally. The two facilities' security perimeters are protected by two electronically monitored chain link fences and are patrolled by response vehicles. Procedures have been implemented to ensure the security of tools, keys, and firearms. The Ionia Correctional Facilities conduct periodic searches of prisoners, their cells, and Ionia Correctional Facilities' employees for contraband\*. Visitors entering the facilities must go through a metal detector and are subject to search by Ionia Correctional Facilities' staff.

**Audit Objective:** To assess the effectiveness of the Ionia Correctional Facilities' safety and security operations.

**Conclusion:** We concluded that the Ionia Correctional Facilities' safety and security operations were generally effective. However, we noted reportable conditions related to prisoner shakedowns and cell searches, tool controls, key security, gate manifests, and accounting for visitors.

### FINDING

#### 1. Prisoner Shakedowns and Cell Searches

Richard A. Handlon Michigan Training Unit (HMTU) and Ionia Maximum Correctional Facility (I-Max) did not always ensure that custody officers\* and housing unit officers\* performed and documented the required number of prisoner shakedowns and cell searches.

\* See glossary at end of report for definition.

DOC policy directive 04.04.110, HMTU operating procedure 04.04.110A, and I-Max operating procedure 04.04.110A require that each custody officer with direct prisoner contact perform a minimum of five prisoner shakedowns per day. Also, each housing unit officer must perform a minimum of three cell or area searches per day. These searches are necessary to help ensure that any prisoner contraband is detected to provide for the safety and security of staff and other prisoners.

Our review of the prisoner shakedown and cell search activity logbooks disclosed:

- a. For one shift, HMTU custody officers, who were required to perform five shakedowns per day, did not document whether the shakedowns were performed for 137 (11.4%) of the required 1,200 shakedowns in November 1998. Also, 13.7% of the custody officers in November 1998 did not document whether the custody officers performed the minimum of five shakedowns on their assigned shift.
- b. I-Max custody officers, who were required to perform five shakedowns per day, did not document whether the shakedowns were performed for 1,011 (38.7%) of the required 2,615 shakedowns in October 1998. Also, 40.7% of the custody officers in October 1998 did not document whether they performed the minimum of five shakedowns on their assigned shifts. These statistics relate primarily to level II prisoners. The level VI prisoners are normally confined to their housing units, and as a result, the housing unit officers shakedown the prisoners each time an individual prisoner enters or exits his cell.
- c. HMTU housing unit officers did not document whether they performed 240 (14.8%) of 1,620 required cell searches for 3 of the 6 housing units in November 1998. Also, 19.6% of the housing unit officers in these 3 housing units in November 1998 did not document whether they performed the minimum of three cell or area searches on their assigned shifts.

By not performing the required number of prisoner shakedowns and cell searches, the Ionia Correctional Facilities have diminished their ability to ensure the safety of prisoners and employees.

## **RECOMMENDATION**

We recommend that HMTU and I-Max ensure that custody officers and housing unit officers perform and document the required number of prisoner shakedowns and cell searches.

## **AGENCY PRELIMINARY RESPONSE**

HMTU agrees and will comply by monitoring staff to ensure that the required minimum number of prisoner shakedowns and cell searches are performed and documented.

I-Max agrees and informed us that it has complied by establishing a monitoring system to ensure that each custody officer performs the required minimum number of shakedowns each month.

## **FINDING**

### **2. Tool Controls**

HMTU and I-Max were not effective in ensuring that staff complied with procedures related to critical and dangerous tools. In correctional facilities, many tools take on special significance because they may be used as instruments of escape or as weapons causing serious injury or death.

DOC policy directive 04.04.120 and related facility procedures require that the tool control officer maintain an up-to-date master inventory list of tools classified as critical or dangerous, establish tool limits for each work area, receive and mark all tools for identification, and complete monthly tool inspections and an annual tool audit. DOC policy and facility procedures also require the work area supervisors to complete and submit weekly tool reports to the tool control officer.

HMTU and I-Max each have a tool control officer responsible for control of the facilities' tools. Our review of the tool control process at these facilities disclosed:

- a. I-Max did not maintain documentation that the tool control officer conducted an annual tool audit for 1997.

- b. HMTU tool control officers did not conduct 42 (33.3%) of 126 required monthly inspections for the six-month period ending December 31, 1998.
- c. I-Max weekly tool inventories were not always submitted to the tool control officer. We noted 8 of 23 (34.8%) work areas did not submit the weekly tool inventories for the months of October through December 1998.
- d. Several discrepancies existed between master inventory lists and inventories on hand:
  - (1) The I-Max grounds maintenance master inventory listed a wheelbarrow and 6 lawn sprinklers that had been removed from the tool area.
  - (2) The I-Max Michigan State Industry (MSI) master inventory listed a tool as an air screwdriver when, in fact, the tool was an electric drill. We also noted that a hand sander and a band saw were listed on the master inventory but had been removed from the tool area.
  - (3) The HMTU master inventory for welding listed 13 chisels. HMTU could not locate 7 of the chisels.
  - (4) The HMTU food service master inventory listed several items (grill scraper, 9 grill scraper blades, a kettle key, a chef knife, 2 small donut blades and lock nut, mixer pin, and a tomato slicer) which had been removed from the food service area.
  - (5) The HMTU auto shop master inventory listed 12 hammers and 3 hammer heads. During our review of this area, we located 15 hammers and only 2 heads.

Because HMTU and I-Max were not effective in ensuring that staff complied with procedures related to critical and dangerous tools, the Ionia Correctional Facilities did not have assurance that all critical and dangerous tools were adequately accounted for. Without this assurance, the safety and security of staff and prisoners is jeopardized.

## **RECOMMENDATION**

We recommend that HMTU and I-Max ensure that staff comply with procedures related to critical and dangerous tools.

## **AGENCY PRELIMINARY RESPONSE**

HMTU and I-Max agree and informed us that they have taken steps to comply. The tool control officers will ensure that scheduled tool inspections are performed and documented. Regarding item a., I-Max informed us that it performed the 1997 tool audit but acknowledges that the documentation was incomplete.

## **FINDING**

### **3. Key Security**

I-Max did not ensure complete accountability for its security keys and did not maintain documentation of the inventory procedures performed to ensure control over the keys.

DOC policy directive 04.04.100 and I-Max operating procedure 04.04.100D require that the key control officer perform physical inventories of all facility security keys each January and July and monthly tests of emergency keys to ensure that all keys are functioning properly.

Our review disclosed that the key control officer did not perform a physical inventory of facility keys in July 1998. Also, monthly tests of emergency keys to ensure that keys were functioning properly were not completed from April through December 1998 and documentation was not maintained for the March 1998 monthly inventory.

Accountability for all keys and documentation of the procedures performed are essential to help ensure the safety of staff and to reduce the possibility of prisoner escapes.

## **RECOMMENDATION**

We recommend that I-Max ensure complete accountability for its security keys and maintain documentation of the inventory procedures performed to ensure control over the keys.

## **AGENCY PRELIMINARY RESPONSE**

I-Max agrees in part in that the July 1998 inventory was not fully completed. I-Max informed us that it completed the December 1998 inventory and will ensure that biannual inventories are completed and documented.

## **FINDING**

### **4. Gate Manifests**

I-Max did not sufficiently document all movement of critical and dangerous items into and out of the facility on gate manifests.

I-Max operating procedure 04.04.100.I requires the preparation of gate manifests. The manifests provide for extensive documentation of the movement of items into and out of I-Max. This operating procedure also requires the use of a numbering system to account for all manifests.

Our review of 51 gate manifests for September 1998 disclosed:

- a. Manifests were not always fully completed. One (2.0%) manifest did not specify whether the items were taken into the facility from the main gate or sallyport\* ; 1 (2.0%) manifest did not specify whether the items were being brought into or taken out of the facility; 1 (2.0%) manifest did not list the name of the individual carrying items into the facility; and 1 (2.0%) manifest was not signed by the gate officer when items were taken through the gates. As a result, I-Max did not have complete documentation for inspections made by gate officers.
- b. Of the 37 manifests that included items to be returned through the gates, 13 (35.1%) did not contain documentation that this occurred. As a result, I-Max had no assurance that the items were actually removed from the facility.

\* See glossary at end of report for definition.

- c. Although I-Max manifests were numbered, I-Max did not account for the manifests. As a result, I-Max could not verify that all critical and dangerous items were removed from the facility.

Failure to sufficiently document all movement of critical and dangerous items on gate manifests could result in critical and dangerous items being left inside the facility. Examples of items listed on the manifests with missing information included tools as defined by DOC policy, such as drills, phones, ladders, grinders, cords, plungers, and torches. Omitting information from the manifests would make it difficult to determine if all items were appropriately accounted for within I-Max.

### **RECOMMENDATION**

We recommend that I-Max sufficiently document all movement of critical and dangerous items into and out of the facility on gate manifests.

### **AGENCY PRELIMINARY RESPONSE**

I-Max agrees with the recommendation and informed us that it has complied by establishing a system to ensure that gate manifests are fully completed. I-Max also informed us that it has compensating controls over the movement of critical and dangerous tools in that vendors or contractors who bring in tools are under direct staff supervision or escort and maintenance staff who bring in tools must inventory and account for their tools on a daily basis.

### **FINDING**

#### **5. Accounting for Visitors**

HMTU custody staff did not ensure that all departing visitors signed out or document that visitors who failed to sign out had, in fact, left the facility premises. HMTU maintains other controls for visitors entering secured areas of the facility.

To help safeguard and account for visitors, HMTU operating procedure 04.01.110a requires visitors to sign a logbook when they enter and leave the facility premises. However, facility procedures do not require custody staff to document the results of their follow-up when a visitor fails to sign out at the end of the day.

Our review of HMTU logbooks for the period October 14, 1998 through October 27, 1998 disclosed that 846 visitors had signed in when entering the facility. However, 680 (80.4%) of these visitors did not sign out when they left the facility premises, and the logbook did not document that custody staff had determined that the visitors had left the facility premises.

Although we found no evidence indicating that the visitors had remained at the facility, all determinations of departures by staff should be documented in the logbook.

Without documentation of the status of visitors who did not sign out, HMTU would, in the event of an emergency, find it difficult to determine the whereabouts and safety of such visitors.

### **RECOMMENDATION**

We recommend that HMTU custody staff ensure that departing visitors sign out or document that visitors who fail to sign out have, in fact, left the facility premises.

### **AGENCY PRELIMINARY RESPONSE**

HMTU agrees that it did not always require visitors to sign out at the front desk as required by HMTU operating procedure. However, HMTU informed us that it maintains several other records to account for visitors who enter the secure perimeter of the facility. HMTU and the Correctional Facilities Administration will alternatively comply by reevaluating the need for visitors to sign out at the front desk.

## **PRISONER CARE AND MAINTENANCE OPERATIONS**

### **COMMENT**

**Background:** The Ionia Correctional Facilities have developed procedures for prisoner care and maintenance operations. These operations include prisoner store and benefit fund operations, preventive maintenance activities, periodic housekeeping and sanitation inspections, food service activities, prisoner accounting, routine fire safety, and the community liaison committee.

**Audit Objective:** To assess the effectiveness and efficiency of the Ionia Correctional Facilities' prisoner care and maintenance operations.

**Conclusion:** We concluded that the Ionia Correctional Facilities' prisoner care and maintenance operations were generally effective and efficient. However, we noted reportable conditions related to preventive maintenance and employee meals.

**Noteworthy Accomplishments:** HMTU has been accredited by the Commission on Accreditation for Corrections of the American Correctional Association.

## **FINDING**

### 6. Preventive Maintenance Plan

HMTU had not developed a comprehensive written preventive maintenance plan and submitted it to DOC for approval.

DOC policy directive 04.03.100 states that each facility shall develop a written preventive maintenance plan and submit it to the Physical Plant Division in DOC's central office for approval. The plan is to be designed to provide economical use of all equipment and to ensure that all equipment will operate effectively during emergency situations. Also, the plan must include regularly scheduled inspections and maintenance tasks for 11 areas.

Although we did not note any maintenance problems at HMTU, there will be an increased need for an effective preventive maintenance program as the facility ages. Without the development and monitoring of a comprehensive preventive maintenance plan, HMTU lacks assurance that its equipment and facility will operate effectively and efficiently.

## **RECOMMENDATION**

We recommend that HMTU develop a comprehensive written preventive maintenance plan and submit it to DOC for approval.

## **AGENCY PRELIMINARY RESPONSE**

HMTU agrees and informed us that it is taking steps to comply. HMTU also informed us that area managers and the physical plant supervisor are in the

process of preparing a preventive maintenance plan that will be sent to DOC's central office for approval.

## **FINDING**

### **7. Preventive Maintenance Activities**

I-Max did not conduct preventive maintenance inspections and repairs as required by its preventive maintenance plan.

I-Max's preventive maintenance plan established schedules for inspecting I-Max's equipment and conducting various inspections and tests of the facility's mechanical, electrical, security, and plumbing systems.

Our review of I-Max's compliance with the preventive maintenance plan for 11 weeks during calendar year 1998 disclosed 19 (32.2%) of 59 instances when I-Max did not perform preventive maintenance activities required by its preventive maintenance plan. I-Max management informed us that the ongoing repairs caused by level VI prisoner damage within the facility reduced the time available to perform preventive maintenance activities.

Although we did not note any maintenance problems at I-Max, there will be an increased need for preventive maintenance activities as the facility ages. Performing necessary inspections and repairs required by the preventive maintenance plan would provide assurance that I-Max's equipment and facility will operate effectively and efficiently.

## **RECOMMENDATION**

We recommend that I-Max conduct preventive maintenance inspections and repairs as required by its preventive maintenance plan.

## **AGENCY PRELIMINARY RESPONSE**

I-Max agrees and will comply by hiring two limited-term staff. This will allow I-Max to fulfill all preventive maintenance functions prescribed by the current year plan.

## **FINDING**

### **8. Employee Meals**

HMTU did not follow employee meal procedures and maintain legible food service records to help ensure that only eligible employees received meals without charge.

Our review of employee meal procedures disclosed:

- a. HMTU did not provide a listing to food service operations indicating the employees eligible to receive meals without charge. DOC policy directive 02.04.105 states that each facility shall maintain a listing to food service operations, updated on a regular basis, of employees entitled to meals without charge. Employees eligible for such meals included custody, housing, food service, and other employees required to remain at the facility during mealtime. Because a listing of employees entitled to meals without charge was not available to food service operations, HMTU was not assured that only eligible employees received meals without charge.
- b. HMTU did not ensure that a civilian food service employee collected meal tickets. DOC policy directive 02.04.105 requires all meal tickets to be turned in to a civilian food service worker to prevent abuse of the tickets. However, we noted that an HMTU prisoner who worked in food service collected meal tickets.

In addition, food service did require all employees to sign a logbook when receiving or purchasing a meal at the facility. However, because of the illegibility of the employee signatures, we could not determine from the logbook whether only eligible employees received meals without charge. Approximately 139 (40.6%) of 342 employee signatures that we reviewed were not legible.

## **RECOMMENDATION**

We recommend that HMTU follow employee meal procedures and maintain legible food service records to help ensure that only eligible employees receive meals without charge.

### **AGENCY PRELIMINARY RESPONSE**

HMTU agrees and informed us that it has taken steps to comply by providing the food service staff with a list of employees who may receive meals free of charge. This list will be regularly updated. Also, an HMTU staff member will collect the meal tickets. In addition, HMTU will ensure that staff sign the logbook in a legible manner.

# SUPPLEMENTAL INFORMATION

## Description of Survey

We developed a survey requesting input from certain area individuals and businesses regarding their association with the Ionia Correctional Facilities.

We mailed this survey to 50 individuals and businesses and received 26 responses. A review of the responses indicated that most respondents were highly satisfied with the facilities' administrations. Also, the responses indicated that public concerns were generally addressed in a timely manner. However, there were some concerns identified involving communication between the facilities and the community. One response indicated a need to notify the community of any problems or emergency situations related to the facilities. We provided a summary of this information to the wardens.

IONIA CORRECTIONAL FACILITIES  
 Richard A. Handlon Michigan Training Unit  
 and Ionia Maximum Correctional Facility  
 Department of Corrections  
Summary of Survey Responses

Copies of Survey Distributed	50
Number of Responses	26
Response Rate	52%

The total number of responses for each item may not agree with the number of responses reported above because some respondents did not answer all questions.

- How would you rate your satisfaction with the frequency of contacts between you or your organization and the Richard A. Handlon Michigan Training Unit and Ionia Maximum Correctional Facility?

<u>Highly Satisfied</u>	<u>Somewhat Satisfied</u>	<u>Somewhat Dissatisfied</u>	<u>Highly Dissatisfied</u>	<u>No Opinion</u>
13	5	3	2	3

- How satisfied are you with how management of the Richard A. Handlon Michigan Training Unit and Ionia Maximum Correctional Facility have addressed your individual concerns?

<u>Highly Satisfied</u>	<u>Somewhat Satisfied</u>	<u>Somewhat Dissatisfied</u>	<u>Highly Dissatisfied</u>	<u>No Opinion</u>
14	3	1	2	3

- How satisfied are you with the timeliness in which your individual concerns are addressed by the Richard A. Handlon Michigan Training Unit and Ionia Maximum Correctional Facility?

<u>Highly Satisfied</u>	<u>Somewhat Satisfied</u>	<u>Somewhat Dissatisfied</u>	<u>Highly Dissatisfied</u>	<u>No Opinion</u>
12	5	1	1	7

4. How satisfied are you with the Richard A. Handlon Michigan Training Unit and Ionia Maximum Correctional Facility process to notify the community of any problems or emergency situations related to the facilities?

<u>Highly Satisfied</u>	<u>Somewhat Satisfied</u>	<u>Somewhat Dissatisfied</u>	<u>Highly Dissatisfied</u>	<u>No Opinion</u>
10	6	3	0	6

5. Do you have any specific safety or security concerns that have not been addressed by Richard A. Handlon Michigan Training Unit and Ionia Maximum Correctional Facility personnel?

<u>Yes</u>	<u>No</u>
4	22

6. If you visited the Richard A. Handlon Michigan Training Unit and Ionia Maximum Correctional Facility, were you satisfied with the security provided to you while at the facilities?

<u>Highly Satisfied</u>	<u>Somewhat Satisfied</u>	<u>Somewhat Dissatisfied</u>	<u>Highly Dissatisfied</u>	<u>No Opinion</u>
18	3	0	0	4

7. Overall, how satisfied are you with the extent of communication between the Richard A. Handlon Michigan Training Unit and Ionia Maximum Correctional Facility and the community?

<u>Highly Satisfied</u>	<u>Somewhat Satisfied</u>	<u>Somewhat Dissatisfied</u>	<u>Highly Dissatisfied</u>	<u>No Opinion</u>
12	5	3	1	5

## Glossary of Acronyms and Terms

cell search	The act of going through a prisoner's cell and belongings looking for contraband.
contraband	Property which is not allowed on facility grounds or in visiting rooms by State law, rule, or DOC policy. For prisoners, this includes any property which they are not specifically authorized to possess, authorized property in excessive amounts, or authorized property which has been altered without permission.
custody officers	Corrections officers who do not work in a housing unit. These officers are assigned to the prison yard, school, control center, visiting room, bubble (central point of entry into and exit from the facility), etc.
DOC	Department of Corrections.
effectiveness	Program success in achieving mission and goals.
efficiency	Achieving the most outputs and outcomes practical for the amount of resources applied or minimizing the amount of resources required to attain a certain level of outputs or outcomes.
gate manifest	A record used to control materials and supplies entering and leaving the facility through the front gates and sallyport.
GED	general educational development.
HMTU	Richard A. Handlon Michigan Training Unit.
housing unit officers	Corrections officers who work in the housing units.

I-Max	Ionia Maximum Correctional Facility.
level II medium security	A classification of prisoners who generally have longer sentences than do minimum security prisoners, who need more supervision but are not likely to escape, or who are not difficult to manage.
level VI maximum security	A classification of prisoners who have demonstrated that they are serious management problems, have assaulted staff or other prisoners, or were considered serious escape risks while in other facilities.
mission	The agency's main purpose or the reason the agency was established.
performance audit	An economy and efficiency audit or a program audit that is designed to provide an independent assessment of the performance of a governmental entity, program, activity, or function to improve public accountability and to facilitate decision making by parties responsible for overseeing or initiating corrective action.
reportable condition	A matter coming to the auditor's attention that, in his/her judgment, should be communicated because it represents either an opportunity for improvement or a significant deficiency in management's ability to operate a program in an effective and efficient manner.
sallyport	Outside area that allows entry into the prison through a gate that is monitored by a custody officer.
shakedown	The act of searching a prisoner, an employee, or a visitor to ensure that he/she does not have any contraband in his/her possession.